

COMPLIANCE & ENFORCEMENT ABATEMENT REQUEST FORM

To be used only for Compliance or Pioneer Cases

FILL OUT THIS SECTION IF YOU ARE REQUESTING AN ABATEMENT FOR AN INDIVIDUAL

Name:	<hr/>		<hr/>	
	<i>Last</i>		<i>First</i>	
Address:	<hr/>		<hr/>	
	<i>Street Address</i>		<i>Apartment/Unit #</i>	
	<hr/>	<hr/>	<hr/>	<hr/>
	<i>City</i>	<i>State</i>	<i>ZIP Code</i>	
Home Phone:	<hr/>	Alternate Phone:	<hr/>	
Primary SSN:	<hr/>	Secondary SSN:	<hr/>	
Tax Year(s) and/or Return Periods: <hr/>				

FILL OUT THIS SECTION IF YOU ARE REQUESTING AN ABATEMENT FOR A BUSINESS

Business Name:	<hr/>			
FEIN:	<hr/>			
Address:	<hr/>		<hr/>	
	<i>Street Address</i>		<i>Apartment/Unit #</i>	
	<hr/>	<hr/>	<hr/>	<hr/>
	<i>City</i>	<i>State</i>	<i>ZIP Code</i>	
Business Phone:	<hr/>	Alternate Phone:	<hr/>	
*Responsible Person	<hr/>			

EXPLANATION OF REQUEST

Submit a detailed explanation of your tax problem(s) and why you are requesting an abatement. The NJ statutes and regulations concerning abatements can be found at N.J.S.A. 54:49-11 and N.J.A.C. 18:2-2.7.

To the best of my knowledge the foregoing statements are true and correct.

Signature:	<hr/>
Printed Name:	<hr/>
Date:	<hr/>

Please note this form must be signed by the Taxpayer, Responsible Person or Taxpayer Representative. If you are a Taxpayer Representative you must attach a copy of form M-5008-R, Appointment of Taxpayer Representative.

*For Responsible Person Determination visit the following Link: <http://www.state.nj.us/treasury/taxation/respons.shtml>